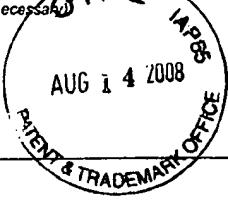


Substitute for form 1449A/PTO <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <small>(Use as many sheets as necessary)</small>		<b>Complete if Known</b> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/642,960</td> </tr> <tr> <td>Filing Date</td> <td>August 18, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Hawkins, Patrick</td> </tr> <tr> <td>Group Art Unit</td> <td>3632</td> </tr> <tr> <td>Examiner Name</td> <td>Epps, Todd</td> </tr> </table>		Application Number	10/642,960	Filing Date	August 18, 2003	First Named Inventor	Hawkins, Patrick	Group Art Unit	3632	Examiner Name	Epps, Todd
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		Attorney Docket No: 558.008US1											
Sheet 1 of 1													



<b>US PATENT DOCUMENTS</b>				
Examiner Initial *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Filing Date If Appropriate
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<b>FOREIGN PATENT DOCUMENTS</b>				
Examiner Initials*	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	T <sup>2</sup>

<b>OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS</b>				
Examiner Initials*	Cite No <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.		
/T.M.E./		"Application Serial No. 09/843,054 (Atty. Ref. 558.003US1) Advisory Action mailed 12-23-2002", 3 pgs		
/T.M.E./		"Application Serial No. 09/843,054 (Atty. Ref. 558.003US1) Final Office Action mailed 10-03-2002", 8 pgs		
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EXAMINER	/Todd Epps/ (11/10/2008)	DATE CONSIDERED
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Substitute Disclosure Statement Form (PTO-1449)  
EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. 1 Applicant's unique citation designation number (optional) 2 Applicant is to place a check mark here if English language Translation is attached